



DESIGN REVIEW BOARD (DRB)

APPLICATION

PLEASE REVIEW 2009 Version Town of Andover Zoning By-Law, Article VIII,
Section 5.2 for SIGN REGULATIONS and DESIGN GUIDELINES

TOWN OF ANDOVER MASSACHUSETTS

Town Offices
36 Bartlet Street
Andover, MA 01810
Tel. No. (978) 623-8300
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www.andoverma.gov

FOR OFFICE USE ONLY

File Number: _____ Approved by DRB (Date): _____

Zoning District: _____ Not Approved (Date): _____

Date Filed: _____ Comments: _____

Hearing Date: _____

1) Business Name _____

2) Business Owner _____ Tel. No. _____

3) Site Address _____

4) Building Owner _____ Tel. No. _____

5) Applicant (If Not Business Owner) _____ Tel. No. _____

6) Total Number of Signs _____

7) Attachments required with Application: original & 5 copies (*Incomplete applications will not be reviewed*)

a) Photographs of Building

b) Material Sample(s)

c) Color Sample(s)

d) Site or Plot Plan (required for all freestanding signs)

e) Graphic Depiction of Proposed Sign(s) Including Dimensions

f) Graphic Depiction of Proposed Sign(s) at Proposed Location(s) to Scale

g) Other, Specify: _____

NOTE: Town of Andover Zoning By-Law, Article VIII, Section 9.6.3 Mandatory Review states: "...the DRB shall review all applications for building permits, special permits or variances for proposals located in areas zoned for General Business and Mixed Use if involving new construction, exterior alteration or a sign larger than four (4) square feet." No Building Permits for Signs in the General Business and Mixed Use Districts will be issued without the appropriate DRB Review. A Building Permit is required prior to installation of any sign.

Municipal projects shall be reviewed by DRB prior to issuance of a Building Permit.

IMPORTANT: This form must be completed before the Design Review Board can consider the application. Six (6) sets (original & 5 copies) of this form, along with supporting documents (in color where required), must be filed with the Inspector of Buildings in the Department of Community Development and Planning at the Town Offices, 36 Bartlet Street, Andover, MA 01810.

No Sign Application will be reviewed without the Business Owner or his Authorized Agent present at the DRB review.
You will be notified of the time, date and location of the meeting.

Signature of Applicant _____ Date _____

Mailing Address _____

E-Mail Address _____

Tel. No. _____ Fax No. _____

8) Location of Proposed Sign _____

9) Sign Support Structure (Description) _____

10) Type of Sign

☐ Attached

☐ Projecting

☐ Freestanding

☐ Awning

☐ Other _____

11) Size of Sign _____

12) Illumination: ☐ Not Illuminated ☐ Internal Illumination ☐ Separate Service

If Illuminated, what type of bulb and intensity? _____

13) Proposed Color(s)/Material(s)

Background _____

Lettering _____

Border _____

Sign Support Structure _____

Other _____

14) Will Sign overhang any public right-of-way? ☐ Yes ☐ No

15) If Yes, Name of Agency that will provide Liability Insurance _____

NOTE: Andover Zoning By-Law, Article VIII, Section 5.2.3.5 states: "Any Sign projecting over a public right-of-way shall be covered by Liability Insurance in the amount of two million dollars (\$2,000,000.00) as verified by a Certificate of Insurance filed with the Town Clerk."

16) Is Zoning Board of Appeals (ZBA) decision required? ☐ Yes ☐ No